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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/900,569	07/05/2001	Tetsuo Ogino	0015049/279(128)	4089
7590	05/05/2005		EXAMINER	
MOONRAY КОЛІМА BOX 627 WILLIAMSTOWN, MA 01267			NGUYEN, CINDY	
			ART UNIT	PAPER NUMBER
			2161	

DATE MAILED: 05/05/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary	Application No.	Applicant(s)	
	09/900,569	OGINO ET AL.	
	Examiner	Art Unit	
	Cindy Nguyen	2171	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133).
- Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1) Responsive to communication(s) filed on 08/24/04.

2a) This action is **FINAL**. 2b) This action is non-final.

3) Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4) Claim(s) 76-92 is/are pending in the application.

4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5) Claim(s) _____ is/are allowed.

6) Claim(s) 76-92 is/are rejected.

7) Claim(s) _____ is/are objected to.

8) Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9) The specification is objected to by the Examiner.

10) The drawing(s) filed on 04 September 2001 is/are: a) accepted or b) objected to by the Examiner.

Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

11) The proposed drawing correction filed on _____ is: a) approved b) disapproved by the Examiner.

If approved, corrected drawings are required in reply to this Office action.

12) The oath or declaration is objected to by the Examiner.

Priority under 35 U.S.C. §§ 119 and 120

13) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

a) All b) Some * c) None of:

1. Certified copies of the priority documents have been received.
2. Certified copies of the priority documents have been received in Application No. _____.
3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

14) Acknowledgment is made of a claim for domestic priority under 35 U.S.C. § 119(e) (to a provisional application).

a) The translation of the foreign language provisional application has been received.

15) Acknowledgment is made of a claim for domestic priority under 35 U.S.C. §§ 120 and/or 121.

Attachment(s)

1) Notice of References Cited (PTO-892)

2) Notice of Draftsperson's Patent Drawing Review (PTO-948)

3) Information Disclosure Statement(s) (PTO-1449) Paper No(s) _____

4) Interview Summary (PTO-413) Paper No(s). _____

5) Notice of Informal Patent Application (PTO-152)

6) Other: _____

DETAILED ACTION

This is in response to communication filed 08/24/04.

In view of the appeal brief filed on 08/24/04, PROSECUTION IS HEREBY REOPENED. The options set forth below.

To avoid abandonment of the application, appellant must exercise one of the following two options:

(1) file a reply under 37 CFR 1.111 (if this Office action is non-final) or a reply under 37 CFR 1.113 (if this Office action is final); or,

(2) request reinstatement of the appeal.

If reinstatement of the appeal is requested, such request must be accompanied by a supplemental appeal brief, but no new amendments, affidavits (37 CFR 1.130, 1.131 or 1.132) or other evidence are permitted. See 37 CFR 1.193(b)(2).

1. *Claim Rejections - 35 USC § 103*

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

2. *Claims 76-84, 86-92 are rejected under 35 U.S.C. 103(a) as being unpatentable over Teshima (US 6272470) in view of Gupta et al. (US 6501849) (Gupta).*

Regarding claim 76, Teshima discloses: A medical image servicing system comprising: a network generally available to the public (5, fig. 1 and corresponding text, Teshima);

At least one subscriber connected to said network for transmitting and receiving medical image and information through said network (Hospital A and B , fig. 1, Teshima);

a single server (2, fig. 1, Teshima) connected to said network for servicing said at least one subscriber upon signaling by said at least one subscriber and through said network, said single server comprising a data base (database in image server 2, fig. 1, Teshima).

means for registering in said database medical images and information transmitted through said network by said at least one subscriber (col. 16, lines 50-60, Teshima);

said medical images being associated with at least one image selected from the group consisting of MRI, X-ray CT, ultrasond, PET, digitized X-ray and CR (col. 6, lines 59 to col. 7, lines 4, Teshima); and

Wherein said single server further comprises:

Means for compressing in data size medical images when transmitted through said network and for decompressing in data size said medical images to original data size when received through said network by said at least one subscriber seeking access (col. 15, lines 30-54, Teshima); and

However, Teshima didn't disclose: means for checking and verifying legitimacy of a subscriber to access desired medical images and information by signaling through said network . On the other hand, Gupta discloses: means for checking and verifying legitimacy of a subscriber to access desired medical images and information by

signaling through said network (col. 11, lines 17-29, Gupta). Therefore, at the time the invention was made, it would have been obvious to a person of ordinary skill in the art to include the steps for checking and verifying legitimacy of a subscriber to access desired medical images and information by signaling through said network in the system of Teshima as taught by Gupta. The motivation being enable the system provided a license module for verifying the status of license, fee or contractual subscriptions between the diagnostic system and should be understood to include various arrangements, services, information, software and the like.

In addition, Teshima/Gupta discloses: Means for processing and delivering said medical images and information through said network to said subscriber seeking access after checking and verifying legitimacy of said subscriber to said desired medial images and information (col. 8, lines 50-60, Gupta);

Means for producing backup of said medical images registered in said database (col. 9, lines 1-9, Gupta).

Regarding claim 77, all the limitations of this claim have been noted in the rejection of claim 76 above. In addition, Teshima/Gupta disclose: wherein said at least one subscriber comprises a hard copy device (col. 8, lines 16-19, Teshima) and wherein said at least one subscriber transmits format information including image identifier information to said hard copy device, wherein hard copy device receives delivery information through said images corresponding to said image identifier information through said network and the provides a hard copy of said medical images (col. 17, lines 15-33, Teshima).

Regarding claim 78, all the limitations of this claim have been noted in the rejection of claim 76 above. In addition, Teshima/Gupta discloses: wherein said at least one subscriber is a software executing subscriber running medical software for transmission through said network to said single server (col. 8, lines 28-50, Teshima); and wherein said single server manages medical software and registers said medical software transmitted through said network by said at least one subscriber in said database and causes delivery of said medical software through said network to said software executing subscriber (col. 8, lines 28-50, Teshima).

Regarding claim 79, all the limitations of this claim have been noted in the rejection of claim 75 above. In addition, Teshima/Gupta discloses: wherein two or more subscribers are provided, each connected to said network (hospital A and B, fig. 1, Teshima).

Regarding claim 80, all the limitations of this claim have been noted in the rejection of claim 76 above. In addition, Teshima/Gupta discloses: wherein said at least one subscriber comprises means for specifying types of image processing to be communicated through said network to said single server, (col. 6, lines 59-col. 7, lines 7, Teshima).

Regarding claim 81, all the limitations of this claim have been noted in the rejection of claim 76 above. In addition, Teshima/Gupta discloses: wherein said single server comprises means for informing said at least one subscriber through said network of type of image processing to be applied (col. 7, lines 5-17, Teshima).

Regarding claim 88, all the limitations of this claim have been noted in the rejection of claims 76 and 80 and 81 above. It is therefore rejected as set forth above.

Regarding claim 82, all the limitations of this claim have been noted in the rejection of claim 59 above. In addition, Teshima/Gupta discloses: wherein said single server comprises means for establishing communication with said at least one subscriber when image processing is completed (col. 6, lines 49 to col. 7, lines 17, Teshima); and means for transmitting through said network said medical images subjected to said image processing to said at least one subscriber (col. 6, lines 49 to col. 7, lines 17, Teshima).

Regarding claim 83, all the limitations of this claim have been noted in the rejection of claim 76 above. In addition, Teshima/Gupta discloses: wherein said at least one subscriber comprises means for transmitting through said network to said server, a request for medical images subjected to image processing (col. 6, lines 49 to col. 7, lines 17, Teshima); and means for receiving said medical image from said single server through said network (col. 6, lines 49 to col. 7, lines 17, Teshima).

Regarding claim 84, all the limitations of this claim have been noted in the rejection of claim 76 above. In addition, Teshima/Gupta discloses: wherein said single server comprises means for storing each medical image in at least one form before image processing (as compressed) and means for storing each medical image in at least one form (decompressed) after said image processing (col. 15, lines 30-54, Teshima).

Regarding claim 86, all the limitations of this claim have been noted in the rejection of claim 76 above. In addition, Teshima/Gupta discloses: wherein said single server comprises means for polling said at least one subscriber through said network to collect medical images before image processing (col. 6, lines 59-65, Teshima).

Regarding claim 87, all the limitations of this claim have been noted in the rejection of claim 76 above. In addition, Teshima/Gupta/Tanaka discloses: wherein said single server comprises means for sending through said network to a delivery destination imaging conditions for said medical images (col. 15, lines 30-54, Teshima).

Regarding claim 89, all the limitations of this claim have been noted in the rejection of claims 83 and 88 above. In addition, Teshima/Gupta discloses: reading medical images from said database; sending each medical image from said single server through said network to said one subscriber and display said medical images by said one subscriber (col. 6, lines 49-58, Teshima).

Regarding claim 90, all the limitations of this claim have been noted in the rejection of claim 88 above. In addition, Teshima/Gupta discloses: wherein said one subscriber requests through said network of said single server registration of said medical images and comprising the further steps of requesting imaging conditions by said single server to said one subscriber or by said one subscriber to said single server through said network (col. 7, lines 5-17, Teshima);

Sending said imaging conditions by said one subscriber to said single server through said network or by said single server to said one subscriber through said network (col. 7, lines 5-17, Teshima);

Said single server registering said medical images according to imaging conditions in said database (col. 16, lines 50-60, Teshima).

Regarding claim 91, all the limitations of this claim have been noted in the rejection of claims 76, 88 and 89 above. It is therefore rejected as set forth above.

Regarding claim 92, all the limitations of this claim have been noted in the rejection of claim 91 above. In addition, Teshima/Gupta discloses: wherein said single server further sends through said network to said one subscriber request for identification information and said one subscriber sends such identification information to said single server through said network, wherein said single server reads medical images from said database and processes said medical images prior to sending results thereof to said one subscriber through said network (col. 7, lines 5-17, Teshima).

3. Claims 85 is rejected under 35 U.S.C. 103(a) as being unpatentable over Teshima (US 6272470) in view of Gupta et al. (US 6501849) (Gupta) and further in view of Tanaka (U.S 6564256).

Regarding claim 85, all the limitations of this claim have been noted in the rejection of claim 83 above. In addition, Teshima/Gupta discloses: wherein said request is for only part or all of said medical image and wherein said part or all of said medical image are sent through said network to said at least one subscriber. On the other hand, Tanaka discloses: wherein said request is for only part or all of said

medical image and wherein said part or all of said medical image are sent through said network to said at least one subscriber (col. 8, lines 3-25, Tanaka). Thus, at the time invention was made, it would have been obvious to a person of ordinary skill in the art to include steps request is for only part or all of said medical image and wherein said part or all of said medical image are sent through said network to said at least one subscriber in the combination system of Teshima/Gupta as taught by Tanaka. The motivation being enables to reduce and transfer of medical image at a higher speed.

Conclusion

The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

Sloane (U.S 5619991). Delivery of medical services using electronic data communications.

Gupta et al. (U.S 5581460). Medical diagnostic report forming apparatus capable of attaching image data on report.

4. *Contact Information*

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Cindy Nguyen whose telephone number is 703-305-4698. The examiner can normally be reached on M-F: 8:00-5:00.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Safet Metjahic can be reached on 703-308-1436. The fax phone numbers for the organization where this application or proceeding is assigned are 703-746-7239 for regular communications and 703-746-7240 for After Final communications.

Art Unit: 2161

Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the receptionist whose telephone number is 703-305-3900.

C
Cindy Nguyen
April 20, 2005

Frantz Coby
FRANTZ COBY
PRIMARY EXAMINER